IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE

In re:	
W.R. GRACE & CO., <u>et al</u> .,) Case No. 01-1139 (JKF)) Jointly Administered)
Debtors.	Objection Date: December 2, 2011 at 4:00 p.m. Hearing: December 19, 2011 at 9:00 a.m.
DAVID T. AUSTERN, ASBESTOS PI FOR COMPENSATION AND REIMBU	MONTHLY INTERIM APPLICATION OF FUTURE CLAIMANTS' REPRESENTATIVE IRSEMENT OF EXPENSES FOR THE PERIOD HROUGH APRIL 30, 2011
Name of Applicant:	David T. Austern, Asbestos PI Future Claimants' Representative ("FCR")
Authorized to Provide Professional Services to:	As the FCR
Date of Retention:	May 25, 2004
Period for which compensation is sought:	April 1, 2011 through April 30, 2011
Amount of Compensation (100%) sought as actual, reasonable, and necessary:	\$1,100.00
80% of fees to be paid:	\$ 880.00 ¹
Amount of Expense Reimbursement sought as actual, reasonable and necessary:	\$ 0.00
Total Fees @ 80% and 100% Expenses:	\$ 880.00

¹ Pursuant to the Administrative Order, as Amended dated April 17, 2002, absent timely objections, the Debtors are authorized and directed to pay 80% of fees and 100% expenses.

This is an:	interim	X	monthly		final application.
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The total time expended for fee application preparation during this time period is 0.00 hours and the corresponding fees are \$0.00 and expenses are \$0.00. Such time spent on such tasks will be requested in subsequent monthly interim applications or have been performed by the FCR's bankruptcy counsel, Orrick, Herrington & Sutcliffe LLP.

COMPENSATION SUMMARY APRIL 2011

Name of Professional	Position of Applicant	Hourly Billing	Total Billed	Total
<u>Person</u>		Rate	Hours	Compensation
David T. Austern	Future Claimants' Representative	\$500.00	2.20	\$1,100.00
Grand Total:	_		2.20	\$1,100.00
Blended Rate: \$500.00				

Total Fees: \$1,100.00 Total Hours: 2.20 Blended Rate: \$500.00

COMPENSATION BY PROJECT CATEGORY

Project Category	<u>Total Hours</u>	<u>Total Fees</u>
Plan & Disclosure Statement	2.20	\$1,100.00
TOTAL	2.20	\$1,100,00

EXPENSE SUMMARY

Expense Category	<u>Total</u>
No Expenses	\$0.00
TOTAL	\$0.00

Respectfully submitted,

Dated: August 9, 2011 /S/ DAVID T. AUSTERN

David T. Austern

Claims Resolution Management Corporation

3110 Fairview Park Drive, Suite 200 Falls Church, VA 22042-0683

(703) 205-0835